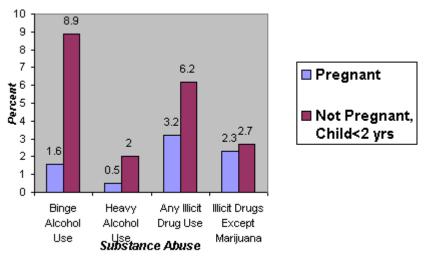
Rhode Island Department of Health Health Policy Briefs

New Substance Abuse Treatment Options for Pregnant and Parenting Women

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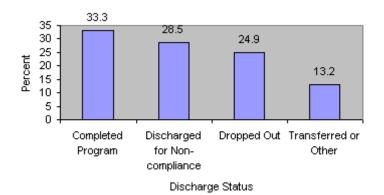
Many pregnant and parenting women use alcohol and illegal drugs.



Percent Using Alcohol or Drugs, By Substance Abuse Category, Pregnant Women and Other Women with Children Under Age 2, United States, 1995-96

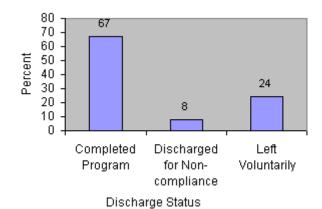
National surveys indicate that in 1995-96 3.2% of pregnant women and 6.2% of women with children under age 2 reported using illicit drugs, often drugs other than marijuana, in the past month. In addition, 1.6% of pregnant women and 8.9% of women with children under age 2 used alcohol to excess in the past month by having five or more drinks on an occasion ("binge drinkers"). Some of these did so five or more times in the past month ("heavy drinkers"). (See figure). At these rates, there were an estimated 400 pregnant women and 1,500 women with young children who were using illicit drugs and 200 pregnant women and 2,200 women with young children who were abusing alcohol in Rhode Island in 1996. Surveys based on self-reported use may under-estimate actual use rates based on laboratory tests; for example, in 1989, 7.5% of women who gave birth in hospitals in Rhode Island had evidence from urine samples of illicit drug use within the 48 hours prior to hospital admission.

State-funded substance abuse treatment programs treat many women of child-bearing age.



Status of Women Ages 15-44 Years Discharged from State-Funded Treatment Facilities, RI 1995 During the state's 1996 fiscal year, over 4,000 Rhode Island resident women ages 15-44, most of whom (99%) had one or more dependents, received treatment for substance abuse from facilities funded by the Department's Division of Substance Abuse. Of these, 41% primarily used alcohol, 29% used heroin, 18% used cocaine, and 7% used marijuana. Over half left treatment before completion, and over two-thirds left treatment still using alcohol or other drugs. (See figure.) Furthermore, 60% of women treated during the fiscal year were readmitted one or more times during the twelve-month period. These figures include only patients who were discharged from treatment during the period and therefore exclude many women in long-term methadone maintenance.

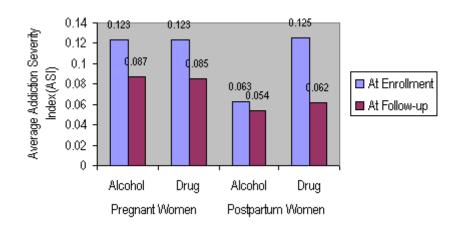
The residential treatment program SSTARBIRTH shows improved outcomes for substance-abusing women.



Status of Women Discharged from SSTARBIRTH Program, 1994-1997 SSTARBIRTH is a federally-funded demonstration program of residential treatment for pregnant and parenting mothers and their young children. It serves up to 13 women, who reside at the program site with their children for up to one year and receive aftercare for two years. Among the 63 women treated during 1994-1997, 71% used cocaine primarily, 17% used heroin, 6% used alcohol, and 5% used marijuana. Of the 51 women who had left the program by December 1997, the majority (67%) completed the program. (See figure.) Women admitted while

pregnant delivered 22 infants, all of whom were born free of the acute effects of illicit drugs and alcohol. Most women (95%) were involved with the Department of Children, Youth, and Families at admission; 78% of these had their cases closed soon after discharge.

The outpatient treatment program Project LINK also demon-strates improved outcomes.



Addiction Severity Index of Project LINK Patients at Addmission and at Follow-up, by Substance and Pregnancy Status, 1992-1996

Project LINK is an outpatient treatment program for pregnant and post-partum women at Women and Infants Hospital. Started in 1992 as a federally-funded demonstration program, its purpose is to integrate substance abuse services into the maternal and child health system. Among 212 enrollees evaluated, pregnant women showed reductions in their abuse of alcohol and other drugs and post-partum women showed reductions in their abuse of other drugs. (See figure.) Women who enrolled while pregnant had better birth outcomes than women who enrolled post-partum, including larger babies (400 grams larger, on average), longer gestation (two weeks longer), shorter hospital stays (six days shorter), and shorter stays in neonatal intensive care (eight days shorter). Although not evaluated against other treatment programs, the findings suggest substantially lower medical costs for the infants of women who enrolled while pregnant.

Public policy decisions should support successful programs.

Substance abuse can have severe and lasting health and social consequences for pregnant and parenting women and their children. Rhode Island needs to support substance abuse treatment programs which show positive outcomes. SSTARBIRTH and Project LINK are two examples of innovative programs that have been examined for their treatment efficacy. These programs, and others like them, address the special treatment needs of women with substance abuse problems, such as needs for comprehensive health services, mental health treatment, child care, and parenting skills training, as well as the need to address problems arising from histories of domestic violence and sexual assault.

Rhode Island has established the Treatment Outcomes and Performance Pilot Study (TOPPS) under a grant from the federal Center for Substance Abuse Treatment. This project is studying a sample of pregnant and parenting women being treated at nine licensed substance abuse treatment programs. The outcomes evaluation will be based on two standard measures, the Addiction Severity Index and the Treatment Services Review and will determine which treatment services are most likely to produce positive outcomes. Improving the likelihood of positive treatment outcomes will result in better health and functioning of pregnant and parenting women and their children and decrease the medical and social costs resulting from substance abuse.

Data Sources

The National Household Survey on Drug Abuse is an annual survey of a national sample of non-institutionalized adults, performed by the Substance Abuse and Mental Health Services Administration.

The Client Information System, Division of Substance Abuse, Rhode Island Department of Health covers all clients admitted with a primary diagnosis of substance abuse or dependence to any substance abuse treatment program that receives state funding. The system maintains a record of all admissions, changes in service, transfers between agencies, or discharges of such clients.

For Additional Information on this Subject

Publications

Preliminary Results from the 1996 National Household Survey on Drug Abuse. Substance Abuse and Mental Health Services Administration, DHHS Pub. No. (SMA) 97-3149 (July 1997).

Client Statistical Report and Analysis, July 1, 1995 to June 30, 1996. Rhode Island Department of Health, Division of Substance Abuse.

Centers for Disease Control and Prevention. "Statewide Prevalence of Illicit Drug Use by Pregnant Women - Rhode Island." MMWR 39:225-227 (1990).

Caldwell D. SSTARBIRTH's Success: Interim Program Evaluation Findings. National Perinatal Information Center (January 1998).

Sweeney P. Project LINK Demonstration Grant: 1991-1996 Final Report. Women and Infants Hospital (January 1997).

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